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URBAN DISTRICT OF ASHINGTON

ANNUAL REPORT

of the

Medical Officer of Health

and

Senior Sanitary Inspector
1954



ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH for 1954.

To the Chairman and Members of the Urban District Council of Ashington

Mr. Chairman and Councillors,

I have the honour to present to you, my report for 1954.

In connection with the vital statistics it may be noted that the birth rate has fallen but is still slightly above the national rate. The death rate has risen to 12.27 per 1.000 compared with 11.95 in 1953 and 11.3 for the country as a whole in 1954. More satisfactory is the fact that the infantile mortality rate of 15.49 per 1.000 live births marks a new low record and is much below the national rate of 25.5 per 1,000 births. The neonatal death rate was 11.06 which, again, compares favourably with the figure of 17.7 for England and Wales. The total numbers involved are, of course, small and, therefore, no very great significance can be attached to them but they do give some cause for satisfaction.

The incidence of notifiable infectious disease remains low and for the fifth successive year no case of Diphtheria occurred. Not since 1946 has this disease caused any deaths in Ashington.

The completion of 100 new Council houses made a useful contribution towards the solution of the housing problem but the final solution is not yet in sight.

The need for additional houses remains great and the position is complicated by the continuing rise in building costs and, consequently, in rents which are already beyond the means of many.

In conclusion, I wish to thank the members of the Council for the consideration they have shown me and to express my appreciation of the assistance and co-operation I have received from the staffs of the various Council departments and, in particular, from the Sanitary Inspectors.

1 am,

Mr. Chairman and Councillors

Your obedient Servant.

C. B. McGREGOR, M.B., D.P.H.

Medical Officer of Health, Urban District of Ashington.

URBAN DISTRICT COUNCIL OF ASHINGTON

OFFICERS OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health	C. B. McGREGROR, M.B., Ch.B., D.P.H.
Assistant Medical Officer	KATHLEEN DICK, M.B., B.S., B.Hy., D.P.H.
Sanitary Housing Inspector	G. W. TATE, F.S.I.A., M.R.S.I.
Sanitary Inspector	H. S. WILSON, M.S.I.A. Resigned 29.8.54. S. MUSK, M.S.I.A. Appointed 26.4.54.
Sanitary Inspector	R. P. BRUCE, R.S.I., S.I.E.J.B. Resigned 31.1.54. H. G. BELL, M.S.IA. Appointed 6.9.54.
Office of the Medical Officer of Health	146, Station Road, Ashington.
Telephone	Ashington 2287.
Office of the Sanitary Inspector	Council Chambers, Ashington.
Telephone	Ashington 3210.

SECTION A

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Ashington Urban District has an area of 6,057 acres and is bounded, on the south, by the River Wansbeck, on the west and north, by the Morpeth Rural District and on the east, by the Urban District of Newbiggin-by-the-Sea.

Although the area is industrial and the great majority of the population is engaged in coalmining, quite a large part of the district is rural in character, as is shown by the fact that it contains eleven farms.

Most of the houses are owned by the National Coal Board and are built in long rows of rather depressing uniformity and monotony. The task of making this compact part of the town more attractive to the eye is one of some complexity but, given co-operation by the tenants, it could be done. This project is mentioned elsewhere in the report. The Council has done a great deal, to this end, by planting large numbers of trees to line the roads in and around the town.

Apart from coal-mining, employment is provided by the farms in the area and by three factories engaged in electrical engineering, and the manufacture of clothing and of cake decorations, respectively.

During 1954 the closure and demolition of the houses at New Moor was begun, by agreement with the N.C.B., and made good progress. This represents almost the whole of the slum clearance which the Council will have to carry out apart from some individual unfit houses occupied mainly by agricultural workers. There remains the task of improving the many sub-standard houses in the district.

Area in Acres	6,057
Registrar-General's estimate of Resident Population mid-1954	28,420
Rateable Value	£132.250
One Penny Rate produces	£500
Number of inhabited houses (end of 1954)	8,299

VITAL STATISTICS

BIRTHS

Live Births: Legitimate Illegitimate	Total 446 6	Male 238 3	Female 208 3		
	452	241	211		
Birth Rate per 1.000 of the estimated population (Comparability Factor 0.98) Standard Birth Rate			15·90 15·58		
Still Births:	Total	Male	Female		
Legitimate	8	2	6		
Illegitimate		_			
	8	2	6		
Rate per 1,000 total (Live and Still) Births Rate per 1,000 of the estimated resident population					

DEATHSTotal Male Female

293 150 143		
Death Rate per 1,000 of the population		10.31
(Comparability Factor 1·19) Standard Death Rate		12-27
Deaths from Puerperal Causes (heading 30 of the Registrar-General's Short	List):	
Pregnancy, Childbirth and Abortion		1
Rate per 1.000 total (Live and Still) births		2.17
Death Rate of Infants under 1 year:		
All Infants per 1.000 live births		15-49
Legitimate Infants per 1.000 ligitimate live births		13.45
Illegitimate Infants per 1,000 illegitimate live births		116.67
Deaths from Cancer (all ages)		53
Deaths from Measles (all ages)		Nil
Deaths from Whooping Cough (all ages)		Nil
Deaths from Diarrhoea (under 2 years)		Nil
The Registrar-General supplies the following:		
CAUSES OF DEATH, 1954.	Mola	Camala
1. Tuberculosis, Respiratory	Male 1	Female 3
2. Tuberculosis (other forms)	_	_
3. Syphilitic Disease4. Diphtheria	_	_
5. Whooping Cough	_	_
6. Meningococcal Infections 7. Acute Poliomyelitis		_
8. Measles	—	_
9. Other Infective and Parasitic Diseases 10. Malignant Neoplasm, stomach		
11. Malignant Neoplasm, lung, bronchus	6	 3 3 18
12. Malignant Neoplasm, breast 13. Malignant Neoplasm, uterus	_	3
14. Other Malignant and Lymphatic Neoplasms	16	18
15. Leukaemia, Aleukaemia 16. Diabetes	1	_
17. Vascular Lesions of Nervous System	23	2 23 15
18. Coronary Disease, Angina 19. Hypertension with Heart Disease	28 3	15 2
20. Other Heart Diseases	20	16
21. Other Circulatory Diseases 22. Influenza	12	11
23. Pneumonia	3	1
24. Bronchitis 25. Other Diseases of Respiratory System		12 1
26 Ulgar of Stomach and Duodenum		1
27. Gastritis, Enteritis and Diarrhoea		2
28. Nephritis and Nephrosis 29. Hyperplasia of prostate	2 1	_
30. Pregnancy, Childbirth, Abortion	<u> </u>	1
31. Congenital Malformations 32. Other Defined and Ill-defined Diseases	14	15
33. Motor Vehicle Accidents	1	1
34. All other Accidents	3	1
36. Homicide and Operations of War		
	150	143
Deaths of Infants under 1 year:	Male	Female
Legitimate	4	2
Illegitimate	1	_
	5	2

CHIEF CAUSES OF DEATH IN ASHINGTON

	Total No.	% of Total Deaths
Diseases of the Heart and Circulation	. 107	36.52
Malignant Neoplasms	53	18:09
Vascular Lesions of Nervous System	. 46	15.699 *
Bronchitis	. 23	7.85
-		
	229	78.16

INFANTILE MORTALITY 1954

The infantile mortality rate reached a new low level in 1954. There were only 7 deaths of children under the age of 1 year a reduction of 2 on the total for 1953, which was the lowest previously recorded. The death rate was 15.49 per 1,000 live births and compared favourably with the national rate of 25.5 per 1,000 live births in 1954.

The following table shows the comparative mortality rates during the past 14 years:

	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954
Number of Deaths from Diarrhoea and Enteritis under 2 years	1	1	2	5	2	_	1	1	2	_	1			
Infantile deaths under 1 year	30	23	42	24	27	30	29	29	16	21	24	20	9	7
Infantile Mortality	74.4	55.4	82.19	44.52	48.82	49.9	46.9	58.1	30.01	39.1	45.8	41.75	18.59	15.49

INFANTILE MORTALITY, 1954.

The following table gives details of the cause of death in the different age groups under 1 year:

Cause of Death		1 - 6 days	1 week		weeks		mths			10 - 12 months		Total under 1 year
Prematurity	2	1		_		3		_				3
Congenital Abnormality		_	_		_	_	_	1			1	1
Pneumonia		_	_	1		1	_		_		_	1
Hepatitis	_	_	_	_				-	1		1	1
Prematurity (due to maternal pyelitis)		1			_	1	_	_			_	1
	2	2	_	1		5	_	1	1	_	2	7

Neonatal mortality rate: 11.06 per 1.000 live births.

In England and Wales the neonatal mortality rate was 17.7 per 1.000 live births.

SECTION B

GENERAL PROVISIONS OF HEALTH SERVICES FOR THE AREA.

LABORATORY FACILITIES

These are provided by the Public Health Laboratory Service at the Newcastle General Hospital, and additional facilities are now available at Ashington General Hospital.

The extent to which these facilities have been utilised is shown below:

Specimen sent by	Specimen	Pos.	Neg.
Regional Hospital Board Chest Physician General Practitioners	Sputa for B. Tuberculosis Sputa for B. Tuberculosis		215
Regional Hospital Board Physician General Practitioners Medical Officer of Health	Faeces for Pathogenic Organisms Faeces for Pathogenic Organisms Faeces for Pathogenic Organisms	2	 1 9
General Practitioners Medical Officer of Health	Urine for Pathogenic Organisms Urine for Pathogenic Organisms		5 4
General Practitoners	Pus for Pathogenic Organisms	1	
General Practitoners	Swab for Pathogenic Organisms	1	
Regional Hospital Board Physician	Blood — Paul Bunnell Test	1	

AMBULANCE FACILITIES

These are provided by the Northumberland County Council. In Ashington there are now six ambulances, and ten drivers are employed, working shifts, providing a 24 hour service.

NURSING IN THE HOME

Domiciliary nursing and midwifery services are provided by the Northumberland County Council. The staff is as follows:

- 1 Superintendent
- 3 Midwives
- 2 General Nurses and 1 General Relief Nurse

HOSPITALS

There are two hospitals in the district, the Ashington General Hospital and North Seaton Hospital, and both are controlled by the Newcastle Regional Hospital Board. North Seaton Hospital was formerly the Isolation Hospital and is now used for general nursing of medical cases and for surgical cases transferred from the General Hospital.

TREATMENT CENTRES AND CLINICS

A Chest Clinic, dealing with cases of Tuberculosis, is held at the Elizabeth Craigs Memorial Clinic in Lintonville Terrace.

These premises, also, are under the control of the regional Hospital Board. A Chest Physician attends twice weekly.

MATERNITY AND CHILD WELFARE

This service is provided by the Northumberland County Council and clinics are held at the Child Welfare Centre, South View, as follows:

ANTE-NATAL CLINIC

Every Wednesday—morning and afternoon. Every Friday, except the last in each month—held morning and afternoon on the first and third Friday of each month, and on the fourth Friday when there are five Fridays in the month. Held in the morning only on the second Friday. A doctor is always in attendance.

POST-NATAL CLINICS

Held monthly — on last Tuesday in the month.

CHILD WELFARE CLINICS

Every Monday and Tuesday morning, and Thursday afternoon.

SUN-RAY CLINICS

Every Monday and Thursday morning, during winter months only.

TODDLERS' CLINICS

Every Tuesday afternoon, except the last Tuesday in the month.

DIPHTHERIA IMMUNISATION

All day the last Friday in the month.

OPHTHALMIC CLINICS

On Saturday monrnings at two-monthly intervals.

DENTAL CLINICS

All day, every weekday.

SECTION C

SANITARY CIRCUMSTANCES OF THE AREA

Among these matters within the province of the Sanitary Department calling for special mention in the review of 1954, are the Civic Exhibition—the second of its kind which the Department has organised—and the De-centralisation of Slaughter of Food Animals. Unrelated but eventful.

The Civic Exhibition was organised and run at the request of the Council from 7—13th October, and like its predecessor in March 1952 was accomplished without any charge to the Authority. The central themes were Housing Improvement, and Smoke Abatement, and the 11 Stands, and regular daily film shows were built round these two matters. Of special interest was a model of typical blocks of "Trees" in the Hirst, prepared under the direction of the Engineer and Surveyor. This scale model demonstrated the practability of provding modern amenities, including indoor W.C.'s, and removing the outhouses in the back streets. This would eliminate the "back alleys" which are used by certain members of the public as dumping grounds for rubbish and old unwanted household articles, and are both insanitary and unsightly. Many complaints are made about these waste strips of ground but no one apparently is willing to help to prevent their being disfigured and misused in this way. These improvements can be carried out under the Housing Act at perhaps one-tenth of the cost of providing a modern Council house. Ashington is fortunate in that it will not be faced with a Slum Clearance problem for many years. It is therefore, surely, practical economics to improve existing properties at a comparatively modest cost and enable the tenants to enjoy modern amenities rather than class the houses as sub-standard dwellings which should be replaced. Apart from the increasing rents which would have to be faced if this were done (building costs tend to rise) it could mean having to go outside the Area for sites, which in turn would quite clearly mean additional expenditure to travel back 'home'. The enormous interest shown, in this model and others kindly lent by the Ministry of Housing and Local Government from its London Exhibition, by the crowds who attended, led one to hope for a great increase in the number of improvements but, at the end of the year, it seemed that interest had been transferred to other matters. Much the same situation arose in Smoke Abatement matters. The defence put forward for using raw coal on modern fuel burning appliances is the cost of an alternative fuel, but this excuse, for such it is, can soon be shown to be without substance.

On July 1st, 1954, the use of the Government controlled slaughterhouse in Ashington for the slaughter of Food Animals for the Urban Districts of Ashington and Newbiggin ceased, and for the first time since December 1939 private slaughtering was permissible. In anticipation of this, several meetings were held with the Butchers in the District, and it was eventually agreed that three only of the slaughterhouses previously in use would be re-licensed. A further application for the re-licensing of a slaughterhouse was refused. The owner lodged an appeal, which was subsequently withdrawn on condition that subject to an undertaking to limit the number of animals slaughtered, the Council would issue a licence. A further application for the re-licensing of a slaughterhouse to kill pigs only, was granted, and at the end of the year, five such premises were in use, and operating satisfactorily.

GENERAL INSPECTION

The policy of securing the maximum results from Informal Action in the abatement of Nuisances continues to be generally satisfactory. This is achieved in the majority of cases by personal contact with the persons concerned. Eight Statutory Notices to abate nuisances were served during the year, with Court action in one case. This action to secure the cessation of use of a hut on an allotment as a dwelling, while rather protracted, was eventually successful. This case stresses the necessity for the observance of tenancy agreements by Allotment Associations.

A Court Order to abate Nuisance, outstanding from last year, was cleared up during the year.

Surprisingly little advantage appears to have been taken by owners to operate the provisions of Rent and Repairs Act. This may be due to insufficient knowledge of the Act by owners, or a known strong reluctance on the part of the tenants to meet any increase of rent for property they feel to be below Council House standard, or a combination of both.

During the year there were 32 applications for Improvement Grants under the Housing Act. Of these 2 were refused. 2 were withdrawn, and 15 of the remainder had been completed by the end of the year.

Closing Orders were imposed on the houses in New Moor, and were voluntarily accepted by the owners. Ten families in occupation were re-housed.

The following table summarises the Notices served:

Nuisances dealt with and work	Verbal or Written	Complied
required to be done.	Notices	with.
To clear choked drains or W.C.	92	92
To provide ashbins	15	22
To repair gutters and rain water pipes	32	29
To repair sinks and waste pipes	2	4
Defective roofs, damp walls	62	51
Defective kitchen ranges	29	19
Defective outbuildings	31	28
Defective w.c. basins	$\frac{2}{2}$	4
Defective sashcords	20	16
Defective wallplaster	13	11
Offensive accumulations	2	2
Defective food stores	9	12
Defective ceilings	16	16
Defective water supply	8	8
Other defects	07	22

WATER

There are 8,299 occupied houses in the District, and of these only 3 are supplied by standpipe, which represents 0.036% of the total.

The whole of the supply is by Tynemouth Corporation, and the regular sampling undertaken by them, plus those samples taken by us show that it continues to be an excellent drinking water of the highest purity.

The following table shows the results of the samples taken by us:

Source	Date	Coliform bacilli per 100 ml.
Town Supply	11.8.54	Nil
Town Supply	16.12.54	Nil
Spring	16.12.54	Nil

DRAINAGE AND SEWERAGE

149 drainage systems were repaired or re-constructed during the year, and these were all tested and approved by the Department. The aim, which is largely reached, is to have consultation and discussion with owners or builders before the work commences, and this gives the maximum benefit to all concerned.

The provision of a Sewage Disposal Plant for the village of Bothal was approved by the Council, and the appropriate steps to that end were instituted.

SWIMMING BATHS AND POOLS

The Institute Baths, open to the Public as well as Institute Members, were visited regularly during the year. Examinations of the Chlorine content and Bacteriological examinations of the Bath water were found to be satisfactory. Regular sampling and testing is also undertaken by the scientific department of the National Coal Board.

SCHOOLS

All schools in the district have a main water supply and a water carriage system.

CINEMAS AND PUBLIC BUILDINGS

Routine inspections of all such buildings were carried out during the year.

ATMOSPHERIC POLLUTION

Quite a number of modern Fuel Burning appliances were fitted into houses during the period under review, and with the post war houses erected by the Council similarly equipped, one is entitled to look for some reduction in pollution, but, and no apology is made for the repetition of the observations which follow, little impact appears to have been made on the majority of householders in the area, with the result that the deposit of soot, etc., remains demonstrably high. Because coal is by no means in short supply in the district, its value and the need for a more careful use are ignored. Until householders appreciate the ill effects on public health and the unnecessary expenditure of time and money required to attempt the elimination of dirt they themselves produce, little progress will be made.

The loss of sunshine in Ashington by reason of the shockingly wasteful use of coal must be considerable and this, together with the harmful constituents of atmospheric dust produced thereby needs to be clearly realised by all who profess to be concerned with healthy living. Apart from the economics of the situation, this continued "fouling of one's own nest" is tragic.

COLLIERY SPOILBANKS

The concern of previous years has been the continued growth of these monstrosities and the apparent complacency of the responsible authorities towards the whole question and the position appears largely unchanged.

The new stone heap which was agreed to have a maximum life of three years was begun early in the year and has proved to be a thorn in the flesh by reason of it being on fire, which, considering the fuel with which it is provided is perhaps not surprising.

Continued insistence on the elimination of burning spoilbanks has been regarded, so far, as of no more than local importance but may eventually bring results. While the area is not affected by fumes, such as are experienced in other colliery districts, and the burning heaps, therefore, do not constitute such a noticeable menace to public health and comfort, they, nevertheless demand constant vigilance, reinforced by greater interest on the part of the people who live in their shadow.

The new railway linking up Lynemouth Colliery to the main line was instrumental in a start being made in the reduction of Woodhorn heap, the waste being used to form the embankment for the railway and work in this direction was proceeding at the end of the year. It is estimated that the heap will be reduced by about one half after the work is finished.

The continued co-operation of the Alkali, etc., Inspector of the Ministry of Housing and Local Government during the year was again much appreciated.

RODENT CONTROL

There is no doubt that the free service given for the elimination of rodents is of considerable benefit not only to the general public but to this Department. In all but rare cases early indication is given of the presence of rats and/or mice.

The sewers are regularly treated and constantly few 'takes' are recorded. These in fact are confined to one small area. Mice infestations in certain business premises would appear to suggest that they are brought into the premises through the medium of the goods from the wholesale market. The indiscriminate scattering of waste food for the alleged purpose of feeding the birds is to be deplored and the number of backyard poultry keepers who are careless feeders is declining in number. During the year all types of premises were treated either by baits or gas according to circumstances and good work was accomplished.

The following table summarises the work done:

	L.A.			PERTY All other (inc. asiness premises	Total
Total No. of Properties in district	8	8287	27	935	9257
No. Inspected because of:					
(a) Complaint		40	5	53	98
(b) As routine surveys	8	128	22	193	351
No. of rat infestations:					
(a) Major	2	_	5	3	10
(b) Minor	1	30	2	25	58
No. of mouse infestations:					
(a) Major	_	_		9	9
(b) Minor	1	18		35	54
No. of infested properties treated by Local					
Authority	4	48	7	72	131

BURIAL GROUNDS

The diminution of available ground for earth burial in the district was brought to the notice of the Council during the year and while it was deferred to a later date it will require to be given serious consideration at no distant date.

PET ANIMALS ACT

There are no shop premises in Ashington licensed under these provisions.

	No. of Inspections during year	No. of Defects or Contraventions of Bye-laws.	No. of Informal Notices Served.	Defects remedied by Informal Action.	No. of Statutory Notices Served.	Defects remedied by Statutory Action.	Legal Proceedings.
HOUSING							
Structural Defects	813	213	194	153	19	19	1
Defective Food Store	29	9	9	10		2	
Dampness	174	62	55	45	7	6	_
Overcrowding	_	_	_	_	_	_	_
WATER SUPPLY							
Insufficient Unsatisfactory	25	8	8	8	_	_	_
DRAINAGE							
Insufficient Defective	204	53	_	53	_		_
SANITARY CONVENIENCES							
Insufficient Defective	152	72	20	70		2	
Food Premises	686	8	_	7	_	_	_
Dairies	9	_	_	—	_	_	_
Slaughterhouses	682	7	_	7	_	_	_
Tents, Vans, etc.	14	3	_	2	1	1	1
Offensive Trades	49	_		_	_	_	_
Factories and Workplaces	139	20	_	21	_	_	_
Keeping of Animals	14	3		3	_	_	_
Insanitary Ashpits and Bins	45	15	15	22		_	_
Offensive Accumulations Smoke Nuisances	7 51	2 10	2	2 10			
Smoke Nuisances	3093	485	303	413	27	30	2

FACTORIES ACTS, 1937 and 1948.

There are 111 Factories and Workshops in the district. The following tables give details of the inspections made and the defects found during the year under review.

The "other premises" included in Section (3) of Table 1 are two building sites and a railway building site on which sanitary accommodation had to be provided.

There are no outworkers in the district.

1. INSPECTIONS

Premises	Number on	Number of							
1 remises	Register	Inspections	Written Notices	Occupiers Prosecuted					
 (i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	37 71	48 84	_						
outworkers' premises)	3	7							
Total	111	139	_	_					

2. CASES IN WHICH DEFECTS WERE FOUND.

	No. of	cases in which	defects were	e found	No. of cases
Particulars	F 4	erred	in which prosecutions		
Fareculars	Found	Remedied	То Н.М.	By H.M.	were
			Inspector	Inspector	instituted
Want of cleanliness	10	10	_	_	_
Overcrowding		_	_		_
Unreasonable temperature		_		_	_
Inadequate ventilation		- 1	_		-
Ineffective drainage of floors	_	-		_	
Sanitary Conveniences:		1			
(a) Insufficient	1	1	_	_	
(b) Unsuitable or defective	8	9			- 1
(c) Not separate for sexes	_	- 1			— i
Other offences against the Act	1	1	_	1	_
Total	20	21		1	

SECTION D

HOUSING

TABULAR STATEMENT OF HOUSING FOR THE YEAR.

Houses completed during the year:	
(a) By Local Authority 100	
(b) By other Bodies or Persons	
CLOSING AND DEMOLITION OF HOUSES.	
Formal Action.	
(1) Number of houses demolished during 1954 as a result of Clearance Schemes other formal action	
(Number of houses included in above which were from pre-war confirmed cle ance areas	
(2) Number of houses closed but not demolished as a result of formal action	Nil
Informal Action.	
(1) Number of houses permanently discontinued as dwellings as a result of informaction and not included above	
RECONDITIONING AND REPAIR.	
RECONDITIONING AND REPAIR. Number of houses made fit during 1954 by procedure under either Housing Public Health Acts:	or
Number of houses made fit during 1954 by procedure under either Housing	
Number of houses made fit during 1954 by procedure under either Housing Public Health Acts: (a) As a result of informal action	
Number of houses made fit during 1954 by procedure under either Housing Public Health Acts: (a) As a result of informal action	191
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Number of houses made fit during 1954 by procedure under either Housing Public Health Acts: (a) As a result of informal action	191 6 — ate Houses 32
Number of houses made fit during 1954 by procedure under either Housing Public Health Acts: (a) As a result of informal action (b) By owners as a result of Statutory Notice (c) By Local Authority in default of owners IMPROVEMENT GRANTS: HOUSING ACT, 1949. No. of Separ (a) Applications submitted to Local Authority during year (b) Applications rejected by Local Authority	191 6 — ate Houses 32 2
Number of houses made fit during 1954 by procedure under either Housing Public Health Acts: (a) As a result of informal action (b) By owners as a result of Statutory Notice (c) By Local Authority in default of owners IMPROVEMENT GRANTS: HOUSING ACT, 1949. No. of Separ (a) Applications submitted to Local Authority during year (b) Applications rejected by Local Authority (c) Applications forwarded to Ministry	191 6 — ate Houses 32
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SECTION E

INSPECTION AND SUPERVISION OF FOOD.

ICE-CREAM (HEAT TREATMENT) REGULATIONS, 1947

During the year 2 samples of ice-cream were taken and submitted to the prescribed tests under the above Regulations. Reports were returned as follows:

Grade 1 — 1 sample Grade 3 — 1 sample

FOOD SHOPS AND FOOD-PREPARING PREMISES

The number of food premises by type, in the area is as follows:

Confectionery	28
Grocery and General Dealers	112
Butchers	24
Greengrocery	24
Bakery	10
Temperance Bars	7
Fish (Wet)	3
Fish and Chips	18
Cafes	5

Sixty-six premises are registered for the sale of ice-cream and six for the manufacture of preserved, etc., meat.

Three premises are registered as dairies, six persons registered as distributors of milk, and 49 persons licensed for the sale of sterilised milk.

Six hundred and eighty-six visits to food-preparing premises were made during the year and contraventions of the Bye-laws regarding the handling of food or of the Food and Drugs Act 1938, were found in eight cases. Seven of these contraventions were remedied during the year after letter or interviews.

CLEAN FOOD BYELAWS

A good deal of attention was directed to this during the year, especially in relation to the open market, but so long as the public are mainly concerned with bargains (and this appears general), rather than with quality and cleanliness, then just so long will difficulties arise. No consideration should be shown to anyone trying to sell an article of food in an uncleanly fashion. The more salutary way is for the purchaser to refuse the article.

New legislation was under discussion in Parliament and this is awaited with the hope that it will remove anomalies and also give a clearer lead to Local Authorities in this matter.

Action was taken against another stallholder for failing to display his name and address on the stall at the open site.

Action was taken against a stallholder for selling chocolate tea-cakes which were unfit for food (by reason of maggots) was taken, but was dismissed on technical grounds.

MEAT AND OTHER FOODS

The Ministry of Food Slaughtering Depot for Ashington was situated in premises belonging to the Ashington Industrial Co-operative Society, Ltd., and up to 29th June the following animals were slaughtered:

CENTRAL SLAUGHTERING

	Bullocks	Heifers	Cows	Bulls	Calves	Pigs	Sheep
Normal Kill	632	432	61	1	228	12	4518
Casualties	18	7	35	5	19	13	156
Owner's Risk	1	3	13	_	_	_	
Total	651	442	109	6	247	25	4674

Since the return of private slaughtering five slaughter-houses have been licensed and two of these extend slaughtering facilities to four other butchers. As from 2nd July the following animals were slaughtered:

PRIVATE SLAUGHTERING

	Bullocks	Heifers	Cows	Bulls	Calves	Pigs	Sheep
Normal Kill	223	851	11	10	10	1029	2983
Casualties	_	_	3	_		_	2
Total	223	851	14	10	10	1029	2985

TOTAL NUMBER OF ANIMALS SLAUGHTERED DURING THE YEAR

	Bullocks	Heiters	Cows	Bulls	Calves	Pigs	Sheep
Normal Kill	855	1283	72	11	238	1041	7501
Casualties	18	7	38	5	19	13	158
Owner's Risk	1	3	13			_	
Total	874	1293	123	16	257	1054	7659

The amount of meat and organs condemned, together with the reasons for condemnation is set out in the following tables. All meat and offal condemned is processed for the extraction of fat, glues, etc.

MEAT AND OTHER ORGANS CONDEMNED, SURRENDERED AND DESTROYED

For Tuberculosis:

Carcases (including one casualty)
(Total Weight 354 stones)

Boyi

ine:		Swine:
Lungs	115	Lungs 3
Heads and Tongues	48	Heads 27
Skirts	17	Livers 2
Livers	22	Mesenteries 2
Hearts	10	Stomachs 2
Mesenteries	11	Gut 2
Spleens	4	Pork
Tripes	3	
Gut	11	
Kidneys	1	
Beef	1210 lbs	

For other Defined Diseases:

Tot other Bennet Bistaste									
Bovine:									
Heads and TonguesLungs	Pleurisy 20		a 1. Hydat	ids 1. Paras	ites 15,				
Livers	Pentastomes 1, Abscesses 5. Cirrhosis (whole) 166, (part) 449, Hydatids 2, Abscesses 28, Cavernous Haemangioma 3. Perihepatitis 1 Pentastomes 2.								
Spleens	Abscesses 1								
Hearts Skirts	Pericarditis Abscesses 6								
Mesenteries		s 4. Abscess	es 1.						
Gut	Johnes Dise	ease 14, Ent	eritis 1.						
Udders		Abscesses 1		and a contract of	,				
Kidneys Fat		irius I, Nep is 5 stones.	nritis I. Hyd	dronephrosis 1	<u> </u>				
Beef	Bruising 35	stones. Abs	cesses 9 sto						
Carcases (all casualties)				1. Johnes Di al weight 151					
Sheep:									
Heads		, Parasites		5 Dl	. 1				
Plucks Livers	Parasites 64	81. Parasite 1. Cirrhosis	s 6. Abscess	ses 5. Pleurisy 4. G. Tennui	and the second of the second o				
Hearts	Pericarditis	1.	2, 1103003303	4, O. Tenna	coms o				
Kidneys	Nephritis 2		1 12 40 11	D (''	10 11				
Mutton			nritis 40 lbs	Deformity	10 168.				
Carcases (of which 17 were casualties)	Bruising 35 lbs. Septic Arthritis 3, Septic Pneumonia 2, Illsetting a Illbleeding 2, Moribund 1, Pathological Emaction 1, Emaciation and Oedema 6, Septicaemia Total 5, (Total Weight 79 stones).								
Swine:									
Lungs	Pneumonia	64. Pleurisy	9, Parasites	. 1.					
Livers	Parasites 10). Cirrhosis	1. Perihepati						
Hearts	Pericarditis								
Pork Carcases (casualty)	Abscesses 3 Septic Arth	ritis 1, weig	ht 72 lbs.						
Calves:									
Carcases (of which 7 were casualties)	Immaturity stone		a I. Total	15 (Total W	eight 27				
CARCASES INSPECT	ED AND (CONDEM	NED						
	Cattle	Cows	Calves	Sheep and	Pigs				
	exc. Cows			Lambs					
No. Killed and inspected	2183	123	257	7659	1054				
All Diseases except Tuberculosio:									
Whole carcases condemned		5	15	20	1				
Carcases of which some part or organ was	- 10	2.5							
condemned Percentage affected with Disease other than	542	36		154	75				
Tuberculosis	24.8	74	5.8	2.3	7.2				
Tuberculosis only:									
Whole carcases condemned	6	2							
Carcases of which some part or organ was	O	2			_				
condemned Percentage affected with Tuberculosis	122 5·9	25 21·9	_	_	25 2·4				
OTHER FOODS									
	and ware	andamnad	and dastes	wad :					
The following foods were found to be unfit				-					
Poultry	Chee Baco		•••••		6 lbs. 2 lbs.				
Bread. Cereals and Cakes	Nuts		•••••		0 lbs.				

SECTION F

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Hospital accommodation for cases of infectious disease is now provided by the Regional Hospital Board at Walkergate Hospital, Newcastle.

TABLE SHOWING ANALYSIS OF NOTIFIED CASES OF INFECTIOUS DISEASES UNDER AGE GROUPS.

Disease	Age unknown	Under 1 year	1-2 years	3—4 years	5-9 years	10—14 years	15-24 years	25—34 years	35—44 years	45-54 years	55—64 years	65—74 years	75 years & over	Fotal	Deaths	Admitted to Hospital
Scarlet Fever Erysipelas		-	-		2	1	_	_		<u>_</u>	-	-	-	3	-	_
Pneumonia					1		1	3		3	2	2		12	4	
Dysentery	—	_	—	- 1	1			_	-		_	1	-	2		_
Meningococcal Meningitis	—	-	1	-	—			-0	-		-	—	-	1	_	-
Measles	} —	3	47	63	71	1		-	_			_	- 1	185		_
Whooping Cough	—	4	3	2	3	-		_	-			-	-	12	-	_

INFECTIOUS DISEASES

MEASLES

A minor epidemic of this disease occurred in 1954. This epidemic began in May, during which month 34 cases were notified, and reached its peak in June with 76 cases. In July 38 cases were notified and, thereafter, the incidence declined sharply although cases were notified in each of the subsequent months. In all there were 185 cases notified but no deaths occurred.

DIPHTHERIA

For the fifth consecutive year no case of Diphtheria occurred in the district and for 8 years, now, no fatal case of this disease has been reported. The prevention of a disease is seldom "news" but the immunisation campaign is an outstanding example of successful preventive medicine and the following table illustrates the altered position as it affects Ashington:

Notifications of and Deaths from Diphtheria 1934-1954

		1934	1935	1936	1937	1938	1939	1940	1941	1942	1943
Cases	 	196	115	56	32	175	179	8	5	12	18
Deaths	 	3	4	_	3	5	4	_	1	2	2
	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954
Cases	 34	197	76	9	5	1	_	_	—	_	_
Deaths	2	4	3	_		_	_				

When it is remembered that a similar situation prevails throughout the country it is possible, in some measure, to appreciate the vast amount of suffering, ill-health and sorrow that has been prevented, not to mention the enormous financial saving. To underline this, two sets of figures can be quoted. In England and Wales in 1944 there were 23,199 cases of Diphtheria with 934 deaths. In 1954 there were 182 cases with 9 deaths.

The price of freedom is often said to be eternal vigilance and this is no less true where freedom from Diphtheria is concerned. The campaign must go on and any tendency to forget the threat of Diphtheria and its potential danger must be energetically opposed. Fortunately, there is, as yet, little evidence of such a tendency in Ashington, but, as the memory of what Diphtheria is like and what it can do recedes into the past, the tendency becomes more and more likely to arise.

DIPHTHERIA IMMUNISATION.

During 1954 there were treated for the first time, at the Child Welfare Centre, at the schools and by private doctors, 445 pre-school and 3 school children. In addition, reinforcing injections were given to 243 pre-school and 114 school children.

At 31.12.54 it was estimated that 4,846 children, under the age of 15 years, had completed a course of treatment during the five years, 1950—1954 and a further 1,091 had been immunised in 1949 or earlier.

This gives an immunityy index for the different age groups as follows:

Under I year	22.63
1 — 4 years	
5 — 14 years	79.03
All children under 15 years	75.8

If the total figures are taken, it is estimated that 69.74% of pre-school children and 92.88% of all children under the age of 15 years, have been immunised at some time.

TUBERCULOSIS. New Cases and Mortality during 1954.

Age Groups			NEW CASES				DEATHS Resp. Non-Resp.					
				sp.								
			M	F	M	F	Total	3.1	_ F	M	- F	Tota
Under 1 year				_		1	1	_	_			
			_	_	II — I	_	-	_	_		_	
5 - 14 years			-	_	_	_	-	_	_	_	_	_
15 - 24 years			1	4		1	6	_	_	_		_
25 - 34 years			3	2		_	5	_	1		_	1
35 - 44 years			2	4	_	_	6	_	2	_	_	2
45 - 54 years			4	1	_	_	5	1	_	_	_	1
55 - 64 years			. 1	_	-	1	2		_	_	_	_
65 - 74 years			· —	_	1	_	1	—		— ,		_
75 years and over			h —				- 1	- 1	_	— '	_	
Age Unknown		• • • • • • • • • • • • • • • • • • • •	-	_	_			_	_	- 1	_	;- -
To	otals		11	11	1	3	26	1	3			4

Case Rate of notified Respiratory Tuberculosis—0.77 per 1,000 of the population.

During 1954, there were notified 22 new cases of respiratory Tuberculosis and 4 cases of non-respiratory Tuberculosis, compared with 14 respiratory and no non-respiratory cases in 1953.

The increase in notifications of respiratory cases need not be taken as, necessarily, implying an increase in the amount of the disease in the community, since there are certain other factors which must be taken into account. In the latter part of 1953 an "Odelca" X-ray camera was installed at the Blyth Chest Clinic and general practitioners were invited and encouraged to send patients for X-ray without previous appointment or formality.

Many patients from Ashington attended at Blyth and it is likely that some, at least, of the increase in notifications is a reflection of the improved facilities for diagnosis, There is also, I believe, a greater awareness of the fact that the kind of patient who, formerly, would have been labelled as a "chronic bronchitic" may in fact, be suffering from chronic pulmonary tuberculosis and more of these patients are being sent for X-ray. The suspicion that this is correct is supported by the fact that numbers of patients, especially men, in the older age groups are being notified for the first time.

It has long been known, or suspected, that a certain proportion of undiagnosed cases is present in every community. These cases represent a much greater threat to their friends and relations than do the known cases of tuberculosis and if their numbers can be reduced by improved facilities and more accurate diagnosis the ultimate benefit will be considerable although, in the meantime, it results in an increase in notifications. It is, therefore, possible to hope that, after a few years of increased notifications, the rate of incidence may drop quite sharply.

There were four deaths from the respiratory form of the disease and none from the non-respiratory form.

This gives a death rate, in Ashington, of 0.14 per 1,000 of the population.

The corresponding figure for England and Wales as a whole, in 1954 was 0.16 per 1,000.

The death rate from non-respiratory Tuberculosis in England and Wales was 0.019 per 1,000.

MORTALITY FROM MALIGNANT NEOPLASMS.

		MALES			FEMALES								
	-	45 - 54	55 - 64	65 - 74	75+	Total	23 - 34	35 - 44	45 - 54	55 - 64	65 - 74	75+	Total
Tongue Breast Oesophagus Bronchus Thyroid Mediastinum Stomach Pancreas Gall-Bladder Bile-Duct Kidney Colon Rectum Bladder Prostate Uterus Cervix Ovary Leukaemia		2		1 - 3 - 2	1	1 — 6 — 1 1 1 — 1 3 4 4 1 4 — — 1 1		1 1 1 1				1 1 1 2 3 3 - - 1	3 1 2 5 3 1 1 2 1 2 1 2 1 2 1 2
Totals		3	9	6	6	24	1	2	2	10	5	8	28

Death rate from malignant neoplasms—1.865 per 1,000 of the population.

Malignant Neoplasms of Lung and Bronchus.

Death Rate in Ashington	0.211	per	1,000.
Death Rate in England and Wales	0.369	per	1.000.

Malignant Neoplasms of all other Sites.

Death Rate in Ashington	1.654 per 1.000.
Death Rate in England and Wales	1.666 per 1.000

Malignant Neoplasms of All Sites.

Total Deat	h Rate ir	Ashington	1.865 per	1,000.
Total Deat	h Rate in	England and Wales	2.035 per	1,000.



